

DISCLOSURE SUMMARY PAGE

Reset Form

Carroll

FORM DR-2 (Rev. 07/2004)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	<u>21340</u>
Logged In	
Scanned	
Computer	
Audited	

COMMITTEE NAME (Must be same as on Statement of Organization)

KIDS FIRSTIMPORTANT: Indicate by # type of committee you are reporting for: 11

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
 (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other
 Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political
 Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

NA

Political Party (if applicable)

NA

Office Sought

NA

District (if Senate or House)

NA

Late reports are subject to
 possible civil and criminal
 penalties.

SIGNATURE OF PERSON FILING REPORT

TELEPHONE

712-792-3480

DATE SIGNED

SEP 21 2005

9-21-05I AM FILING A Second + Final REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.

(report date)

Indicate by # 1☐ CHECK IF AMENDMENT TO REPORT DATED _____

☒ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
 (You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

8-16-05

County & Local Committees, enter County in which Election is held

Carroll**STATEMENT OF CASH ON HAND**

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 1594.60**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

1438.25

Schedule F: Loans Received total (Attach Schedule F)

0

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

3032.85**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

3032.85

Schedule F: Loan Repayments total (Attach Schedule F)

0

CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)

\$ 0

**UNPAID BILLS (From Schedule D - Attach Schedule D)

\$ 0

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$ 0

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

\$ 0**CANDIDATE COMMITTEES ONLY:**

CONSULTANT BREAKDOWN (Schedule G Attached?)

☐ YES ☐ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ 0

For Instructions, See Back of Form

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SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

CONTRIBUTIONS – MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

KIDS FIRST

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
8-11-05	ID# CK# None	John + Cindy Grelman 238 Hillcrest Dr Carroll, IA	None	\$ 50	<input type="checkbox"/>
"	ID# CK# "	Jane + Keith Petersen 2529 Forest St Carroll, IA	"	49	<input type="checkbox"/>
"	ID# CK# "	Steve + Kim Haluska 549 Parkview Carroll, IA	"	100	<input type="checkbox"/>
"	ID# CK# "	Triple A Seeds 1026 Burgess Ave Carroll, IA	"	50	<input type="checkbox"/>
"	ID# CK# "	Eric Ney 701 N. Main St Carroll, Iowa 51401	"	50	<input type="checkbox"/>
"	ID# CK# "	Phil Phillips 435 E. Pleasant Ridge Carroll, IA	"	100	<input type="checkbox"/>
"	ID# CK# "	Unitemized Contributions	"	70	<input type="checkbox"/>
8/12/05	ID# CK# "	Jim + Deanna Gossett 142 Orchard Ave Carroll, IA	"	50	<input type="checkbox"/>
"	ID# CK# "	Nick Badding 304 W. 17th St Carroll, IA	"	50	<input type="checkbox"/>
"	ID# CK# "	Ron Badding 2718 Forest St Carroll, IA	"	50	<input type="checkbox"/>

SUB-TOTAL

\$ 619

TOTAL (If last page of this schedule)

\$

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule A)

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SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

CONTRIBUTIONS – MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

KIDS First

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
8/12/05	ID# CK# None	Unitemized Contributions	None	\$ 25	<input type="checkbox"/>
8/13/05	ID# CK# "	Mark + Barb Hoffman 27282 115th St Lake City, IA 51449	"	30	<input type="checkbox"/>
"	ID# CK# "	Options Inc P.O. Box 654 Carroll, IA 51401	"	150	<input type="checkbox"/>
"	ID# CK# "	Unitemized Contribution	"	50	<input type="checkbox"/>
"	ID# CK# "	Withrock Motor Co P.O. 396 Carroll, IA	"	50	<input type="checkbox"/>
"	ID# CK# "	Tom Paulsen 215 E. Todd Terrace Carroll, IA 51401	"	50	<input type="checkbox"/>
"	ID# CK# "	James + Sue Van Dyke 1608 N. Carroll Carroll, IA 51401	"	50	<input type="checkbox"/>
9/1/05	ID# CK# "	Barry Bruner 225 E 7th Carroll, IA 51401		90 ²⁵	<input type="checkbox"/>
"	ID# CK# "	Glidden Ec Dev Partnership P.O. Box 202 Glidden, IA 51443		324	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 819.25

TOTAL (if last page of this schedule)

\$ 1438.25

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FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

KIDS FIRST

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
8/18/05	ID# CK# NA	Times Herald 508 N. Court Carroll, IA 51401	Newspaper Ads 7-27 to 8-17	\$ 984
"	ID# CK# "	Carroll Today 102 W. 6th Carroll, IA 51401	Newspaper Ads 7-27 - 8-17	252
"	ID# CK# 4	Times Herald 508 N. Court Carroll, IA 51401	Newspaper Ads 7-27 to 8-17	48
9/1/05	ID# CK# "	Options, Inc P.O. Box 654 Carroll, IA 51401	Printing	625.85
9/1/05	ID# CK# "	Glidden Graphic Box 607 Glidden, IA 51443	Newspaper Ads 7-27 - 8-17	324
8/18/05	ID# CK# "	KCI M P.O. 886 Carroll, IA 51401	Radio Ads 7-18 to 8-17	799
	ID# CK#			
	ID# CK#			

SUB-TOTAL \$ 3032.85

TOTAL (if last page of this schedule) \$ 3032.85

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(f).)

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(for Schedule B)